

# **LESTER J. HILP: REMINISCENCES OF A WHITE PINE COUNTY NATIVE, RENO PHARMACY OWNER, AND CIVIC LEADER**

Interviewee: Lester J. Hilp

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## **Description**

Lester J. Hilp was born in White Pine County, Nevada, in 1891. His father, Sol Hilp, was a pioneer of the region, serving Mineral City, Ely, Ward, and Taylor, Nevada, as merchant, stage and freight line operator, postmaster, and political leader. The family moved to Reno, Nevada, in 1900. There, Lester Hilp studied for a career in pharmacy, and entered the profession as a young man. He practiced in several Nevada communities, and in 1915 he bought a drugstore in Reno, where he has been engaged in business ever since. In addition to becoming a prominent businessman of Reno, Mr. Hilp has also been an active civic leader, and is especially well known for his activities in connection with the Shrine Circus.

Mr. Hilp's memoir includes reminiscences about Sol Hilp, discussion of the practices of medicine and pharmacy in Reno, accounts of Reno civic life, and a philosophical conclusion.



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An Oral History Conducted by Mary Ellen Glass

University of Nevada Oral History Program

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## PREFACE TO THE DIGITAL EDITION

Established in 1964, the University of Nevada Oral History Program (UNOHP) explores the remembered past through rigorous oral history interviewing, creating a record for present and future researchers. The program's collection of primary source oral histories is an important body of information about significant events, people, places, and activities in twentieth and twenty-first century Nevada and the West.

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While taking great pains not to alter meaning in any way, the editor may have removed false starts, redundancies, and the “uhs,” “ahs,” and other noises with which speech is often liberally sprinkled; compressed some passages which, in unaltered form, misrepresent the chronicler's meaning; and relocated some material to place information in its intended context. Laughter is represented with [laughter] at the end of a sentence in which it occurs, and ellipses are used to indicate that a statement has been interrupted or is incomplete...or that there is a pause for dramatic effect.

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In order to standardize the design of all UNOHP transcripts for the online database, most have been reformatted, a process that was completed in 2012. This document may therefore differ in appearance and pagination from earlier printed versions. Rather than compile entirely new indexes for each volume, the UNOHP has made each transcript fully searchable electronically. If a previous version of this volume existed, its original index has been appended to this document for reference only. A link to the entire catalog can be found online at <http://oralhistory.unr.edu/>.

For more information on the UNOHP or any of its publications, please contact the University of Nevada Oral History Program at Mail Stop 0324, University of Nevada, Reno, NV, 89557-0324 or by calling 775/784-6932.

Alicia Barber  
Director, UNOHP  
July 2012

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## INTRODUCTION

Lester J. Hilp is a native of White Pine County, Nevada, where he was born in 1891. His father, Sol Hilp, was a pioneer of the region, serving Mineral City, Ely, Ward, and Taylor, Nevada, as merchant, stage and freight line operator, postmaster, and political leader. The family moved to Reno, Nevada, in 1900. There, Lester Hilp studied for a career in pharmacy, and entered the profession as a young man. He practiced in several Nevada communities, and in 1915, he bought the drugstore in Reno where he has been engaged in business ever since. In addition to becoming a prominent businessman of Reno, Mr. Hilp has also been an active civic leader, and is especially well-known for his activities in connection with the Shrine Circus.

When invited to participate in the Oral History Project, Mr. Hilp accepted graciously. Four interviews followed, between May, 1965, and January, 1967. Although the interviews interrupted his business affairs and were occasionally difficult for him because of illness, Mr. Hilp was a cooperative and interesting interviewee. The memoir includes

reminiscences about Sol Hilp, discussion of the practices of medicine and pharmacy in Reno, accounts of Reno civic life, and a philosophical conclusion.

The Oral History Project of the Center for Western North American Studies attempts to preserve the past and the present for future research by tape-recording the reminiscences of persons who have played important roles in the development of the West. Scripts resulting from the interviews are deposited in the Nevada and the West Collection of the University of Nevada Library (Reno) and in the Special Collections department of the Nevada Southern University Library. Permission to cite or quote from Lester Hilp's oral history may be obtained from the Center for Western North American Studies.

Mary Ellen Glass  
University of Nevada  
August, 1968



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## MY EARLY LIFE AND EDUCATION

My father's parents came over from Germany and settled in Cincinnati. He was born in Cincinnati, I can't tell you just when, I don't recall the dates, but there was quite a family. His two brothers, Fred and Henry, came to White Pine County before my father did. They came to White Pine County and settled in Mineral City, which is now called Lane City. At that time there was no town at Ely. Mineral City was the main town. It's about three miles west of Ely. They opened a store in Mineral City.

At Mineral City, there was some mines there. The reason it was changed to Lane City was because a man by the name of Lane built a mill there. And he built it there on condition that they name the town for him. My uncles Fred and Henry moved to Ward, Nevada, which is about forty miles south of Ely, and opened up their store there. They had a store in Mineral City and they opened up a store there. Ward didn't last very long. There was another strike at a place called Taylor, which was across the valley from Ward. They moved the store to Taylor and that was the time that

my father, Sol Hilp, joined them—in Taylor. Then after a year or so in Taylor, the mines there petered out, and they moved to Ely.

My father bought out his brothers, and opened his own store in Ely, about 1888. He became a postmaster in Ely in July 14, 1893. I don't remember, because I was just two years old then. I was born in Ely on July 28, 1891. I remember him having the post office. He had the express office, and also the stage office, and ran a stage line to Eureka and an express line also. Then he ran a freight line. That was all out of Ely. His brother Henry went to San Francisco. His brother Fred stayed in Ely for a couple of years, and then he went to San Francisco.

The reason my father came to Taylor was to go in with his brothers in business. His first thought he was going to be a baseball player. That was just at the start of the major baseball. My father played baseball with a Cincinnati team. While I thought it was the Redlegs, I got a letter from them that advised me that he was not on their register any place they could find. However, there was several small

teams in Cincinnati, and he played on one of them, and they finally combined and formed the Redlegs. According to information that my father had given me, he had played on the team. However, he wasn't an official player as listed in their roster. I have some information that I got from them, because my cousin and I are writing a history of the Hilp family, and we wanted the information. So evidently, he wasn't an official ballplayer as far as the team was concerned.

In White Pine, there was no ball team, or anything like that. He went into business, and continued in business in Ely, until about 1900. At that time, we moved to Reno and the family has lived here ever since.

My father was at one time in charge of the commissary at the Nevada State Prison. At one time, he was clerk of the Nevada Senate, and at one time he was representative in the Assembly from White Pine County. He was never actually engaged in business after we sold out in Ely and moved to Reno.

My mother was born in Virginia City. Her folks afterwards moved to Hamilton, and then to Baker, Nevada. My mother's maiden name was Emma C. Baker, and from information that we have, the town of Baker, which is where Lehman Caves is located, was named after her folks. They didn't stay in Baker too long, because her father moved to Denver, and her mother moved first to Hamilton and then back to Ely.

Before my mother passed away, at one time her older brother and her and I made a trip to Virginia City, to try and find the house where she was born. We found the location, but there was no house there. We found the location from records that we uncovered in the courthouse up there. But there had been a mine there afterwards, and while we were able to pinpoint the location, we could never get any information as to the house or anything.

She was one of the first white girls to be born in Virginia City. She lived to be eighty-six years of age. Of course, she passed away here in Reno. My mother was an Episcopalian.

My father was Jewish and belonged to the Jewish church, and at one time was very active in it. He never was in the militia or any military organization. He was aide de camp to the adjutant general of Nevada in 1888; however, it wasn't exactly a military organization. It was what you might say, quasi-military.

When he went to Taylor, Taylor lasted about ten years. I found a paper that was published in Taylor, and uncovered a copy of it in the Nevada Historical Society. I found this little note. It says, "*The Reflex*" (which is the paper that was published in Taylor) "has some Christmas shopping services. If you have found what you want,"—and this was supposedly after shopping in several other stores in Taylor—"then step into Sol Hilp's. Now if you live in north Taylor," it says, "reverse your steps."

There was an article in one of the papers, which was published in a book called *White Pine Lange Syne*, where it says that all the mining activities, which were going on around that district, were dependent on Sol Hilp's store for all their supplies. This was after Hilp brothers had closed their store in Mineral City, and the one in Ward, and then the one in Taylor.

In going over some of the books that my father left, I found that he was half-owner in about thirty or forty mines, because he'd furnished the owners with supplies, groceries, dynamite, and everything that they wanted, because he had a general merchandise store, hardware store, as well as the post office and the express office and the grocery store. So they were dependent on him. He would supply them, and then take a half interest

in the mine because they couldn't pay him. None of the mines ever seemed to produce anything; however, at the present time there is quite some activity going-on around some of these places. And while the title to the mines has passed into other hands many times since then, three or four of the mines are producing some minerals now. I don't think any of them are big producers, because the price of gold and silver is so low that most all of them are small operations and one- or two- or three-man operations.

My father was interested in local politics out there, and a very strong Democrat, all of his life. And he was very much disappointed when I registered Republican. But I registered Republican, and have been registered ever since.

In White Pine County, there was two brothers, P. C., the one that we called "Boss," and the other one was John Weber. They had a bar, saloon, we called it at the time, in Ely. It used to be generally conceded that my father and Boss Weber controlled Democratic politics in White Pine County. I remember that after we had been down here and gone back to Ely, that there used to be meeting pretty near every night. They would either be in the back of Boss Weber's saloon, or they would be in the back of my father's store. I guess for a number of years, they did control it.

Now the other Weber brother never took an active interest in politics. This is the one they called Boss Weber, who was rather fat and bulky. I remember them very well. The son of the other Weber and I went to school together. Of course, we were about the same age.

I don't think I could tell you much about my father's relationship with Francis G. Newlands. The fact that they were very friendly, I know that. I don't know what

appointment my father expected to get, but I do know that at one time, I think it was one of the reasons that we came to Reno—because he expected to get some federal appointment. For what reason he didn't get it, I never knew. I wasn't interested enough in politics at that time—too young—and I never heard him say what happened. He was still very friendly with Newlands after that; however, he didn't get the appointment.

I don't know whether I could give you an opinion of Newlands, because I was rather young at the time. I met him afterwards, after I was older and knew him when he was United States Senator. He seemed to be a very influential man. And while I think he worked for his own interests a lot, still he did a lot for the state. I've heard that he was kind of sissified, but I wouldn't say that was my impression; I don't know. I've heard that remark many times and I've heard a lot of people say that. I couldn't give you that as my opinion because I don't know. I didn't know him well enough for that.

I think the Newlands Project that he put over in Fallon was a good thing for the state, although he benefited personally by it to a great extent, too. In times like that, the pay of a United States Senator wasn't such that he could just go in and spend his own money, unless he had some money on the side to spend. I don't know how much he made or what he made out of the thing, but I do know that the general opinion at that time was that Newlands made a fortune out of the Newlands Project. What a fortune was at that time is probably a little different than what it is at present.

I remember a sidelight of one campaign in which William Jennings Bryan was running for President. The old McKissick Opera House, which is now the Plaza Hotel, was running at that time, and William Jennings

Bryan spoke in that Opera House on the stage. My father, being one of the prominent Democrats was invited to sit on the stage, and he took me with him. I don't remember whether I particularly wanted to go or not, but I did go. When I got up there, it was very uninteresting to me. I wasn't interested in politics enough to sit on the stage, so I went to sleep. I remember my father was very upset with me when we got home, because I sat on the stage when William Jennings Bryan was speaking, and went to sleep.

I had two sisters who lived, and I had a sister and a brother who died at a very young age. But I had two sisters that lived, and were alive when we moved to Reno. One's name was Ethel May and the other one was Blanche Fredricka. We used to call her Freddie; everybody called her Freddie. That was because she didn't like the name of Blanche, and so instead of Fredricka, which was after her uncle, everybody called her Freddie. She went to the University of Nevada, and taught German in the high school here for one year.

During the first war, Freddie went overseas as a member of the YMCA. I was in the first war and I met her in France, just happen to run on to her. I had no idea she was over there. She knew what company I was in, and in her travels around over there, she was always inquiring where the Eighth Division was. So finally at the camp where I was, she ran on to the Eighth Division and by almost an accident, we met over there, and had a visit for a whole day.

I came back before she did, but the day that she returned, my older sister Ethel passed away in San Francisco. She and her mother had moved to San Francisco by that time. Freddie, after the war, came back to Reno, married a man that she met in France, and lived here for quite some years before she passed away.

I went to kindergarten in Reno and then we went back to Ely, we hadn't moved here, but we came down here and stayed some little time. My mother brought the children down and we went to kindergarten here. Then we went back to Ely, and went to school there for a year or two, and then moved to Reno. I finished grade school and high school in Reno.

At the time that I was going to high school, Latin was one of the courses that was taught in high school. I took four years of Latin, I never knew why, but afterwards it came in very handy when I went into the profession of pharmacy. It was the base; everything was Latin in pharmacy. So I had taken it when I was in high school.

I've been in the drug business practically all my life. You see, my father had the drugstore in his general merchandise store when he was in Ely. And while he wasn't a registered druggist—and at that time there was very few—he had this drugstore and hired a druggist. I used to be around in that.

I finished high school in Reno, in 1908. After I finished high school, I worked with Swift and Company in the egg candling department for several months. Then when winter came along, there wasn't too much to do in that department, so I went back to Ely, where I had some of my folks still living—my uncle on my mother's side. I was able to get, let's say, a job, I guess you'd call it, in the drugstore over there.

I was working for Clark's Drugstore in Ely, Nevada. Fred Clark had three stores. He had one in Ely and one at Ruth and one at McGill. I used to go over to McGill and work extra over there sometimes. He sold the one at Ruth and still had the one at McGill. He's one of the old-timers in Nevada. I just did anything around the store that was necessary to do, mostly waiting on people in the front of the store.



Then spring came along, and the man that was working at the soda fountain left. I took over the making of the ice cream and working in the soda fountain. I worked there until 1912, but not all the time at the soda fountain, because in the winter there was nothing doing.

Then there was a strike in 1912 at both the mines and at the smelter. I was the only single person working in the stores at the time, and it became necessary to lay off some of the help, and myself and one of the married men who was the last to be employed were laid off. So that's how I left Ely and came back to Reno—because there was activities that dropped to nothing over there.

I remember before then, all three stores used to stay open twenty-four hours a day. When I was working there, they rebuilt the drugstore and we never closed while they were building it. They just built right around the store, moved the fixtures in, the showcases, and they went right ahead and worked on the building—built a two-story building right around the drugstore and the bar on the corner, without ever the bar or the drugstore closing. They just stayed open all the time.

I wasn't a witness to any of the violence during the strike, although we did hear about it all the time. I think there was more violence possibly at the mines. The reason there was more violence at the mines was because there was so many factions at the mines. They had the Austrians, the Italians, the Welsh, and none of them liked the other faction. They would work together, but after they were finished working, then they were always fighting. I think as far as violence around the mines, there actually was at McGill. That was my opinion at the time.

My uncle on my mother's side, his name was Steve Baker, was a deputy sheriff in Ely

at the time. And I used to go with him once in a while up to the mines when I wasn't working. That's where I got the opinion that the violence was much more pronounced in there, because there was always some one of the national factions—not factions amongst them as employees, but factions as to their nationality. That's where all the difficulty seemed to be. They would work together and there would be no trouble, but the minute they got out of the mines, why, they were. And they didn't mingle as far as the location in the homes were concerned. Each section had a place where they lived, like the Austrians and Italians. Very few colored people there, there was practically no colored people. We had some Japanese there.

I remember quite some years afterwards, when the railroad first went to Fallon. The railroad opened up in Fallon. I was playing in the band in Reno then. We were going to school, but they couldn't get enough musicians, so we'd play when they had political rallies. We'd play for the Democrats one night and we'd play for the Republicans the next night, but we always got paid at the same place. We always got paid out of George Wingfield's office. We used to be pretty good, because we could go to school, and we could make three dollars by playing in the band at night.

We went to Fallon when the railroad was opened up in Fallon and they had big celebration. The Reno Band went over, and I was a member of the band. I never will forget the big sign that was right at the depot. It said, "No niggers or Japs allowed." At the time I didn't pay much attention to it, but afterwards when you think about those things, how different is at the present time when everybody is clamoring for equality of race. And at that time, they weren't even allowed to get off the train. They didn't allow

them to get off the train. They put them right back on the train and they had to send them right back to Reno. The Japs were employed on the railroad, but they had to stay right in the railroad cars. They couldn't get off. They were never allowed in Fallon for quite some years afterwards.

Each ethnic group in White Pine had their own national holiday, and that's when all the trouble used to be. The Greeks would have a national holiday, and the Austrians and the Italians would always be there to try and stop them. The same with the Austrians. The Austrians were very prevalent over there. They used to put on the big celebrations, and the others would all gang up on them, because, I think, they were in the majority; the Austrians seemed to be in the majority, particularly at the mines. And whenever they had a holiday, you could look for one or two killings at pretty near every one. There were never any inquests or anything—just bury them, and that was the last of it. I think they didn't have enough officers to conduct inquests, and it seemed that each faction took care of their own problems more than the officers did.

When they'd have an Austrian holiday, they'd take over Riepetown, and when the Greeks had a holiday *they* took over Riepetown. Then the Italians had a holiday, *they* took it over. I was a young man, and we used to go up and watch the celebrations sometimes. They never bothered anybody that didn't enter into the activity. You could watch it, and you were perfectly safe in watching it.

I began to study pharmacy under a man by the name of Francis M. Dewey, who taught pharmacy in a college in Maine. The exact location I don't recall. But under him, I would study in the evening. I learned a lot of pharmacy from him in the two years he was there.

After I left Ely, I obtained a position in a drugstore in Reno. At the same time, I was studying pharmacy and, finally I took the examination. In those days it wasn't too difficult, and there was no requirements for a college education. The only requirements were that you were able to pass the examination. And somehow, I passed it. I had studied in high school. I had four years of Latin in high school, and I had had three years of chemistry. I think that is the thing that really made it possible for me to pass the examination, because pharmacy actually was very easy for me, due to the Latin that I had in high school.

I became a registered pharmacist. I worked a couple of years in Reno. After that I went to Yerington, and worked over there in a drugstore for a year. Then I went to Dunsmuir in northern California, and worked up there for six months.

I came back to Reno in about 1913, and went to work for a man by the name of T. R. Cheatham, Cheatham's Drugstore. It was located where Armanko's store is now, or in part of that building. A friend of mine who had worked over there, in the meantime had bought this store in this location. It was then called the Red Cross Drugstore. Shortly after he bought the Red Cross Drugstore, I came to work for him. He developed an incurable disease and had to leave this climate, and I bought the store from him in 1915.

Outside of about two years spent in the army, I've been here ever since. That two years in the army, I had sold the store. When I came back, I took it back, because I had sold it under contract, knowing that they probably couldn't pay for it, which they didn't. So when I came back in July of 1917, I took the store back and I've been here ever since.

I've seen a lot of changes in pharmacy; I've seen a lot of changes in the pharmacists, themselves. The requirements now being, in

most schools, five years in college and one year of internship after you finish college. And in most states, Nevada being probably the last one that adopted the rule, you're not allowed to take the state board examination unless you have a college degree. I think it's a very good thing, although had it been so when I was just starting, I probably would never have become a pharmacist, because I didn't have the college background. I feel that I really learned a lot of pharmacy without the college background, because I had some work under some very good people, and I had a lot of incentive to be registered, so I studied on my own. And, as I say, then the requirements weren't anything like they are now. And it wasn't too difficult to become a registered pharmacist. Many men became registered pharmacists that had a little more educational background than I did, and they're good pharmacists, too.

I think there was a lot of progress made in Reno in my time. When first came to Reno, Virginia Street wasn't paved. There was a little restaurant across the street where the First National Bank main office is now. It was called the Columbo Restaurant. It was afterwards moved out on Lake Street, but it was the same people that ran it when it was over there. And where the Masonic Temple is now was the livery stable. There was another livery stable over where Sears store moved out of. That was called Hymers'. I knew them very well. In fact, Lewis Hymers and I were in school together. We used to spend quite a bit of time down there at the livery stable, because his father would let us go horseback riding every once in awhile. That time was quite a treat.



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## MY CAREER AS A PHARMACIST PIONEER

I'm quite a reader of pharmacy and history. I like to keep up-to-date in pharmacy and I have, even though I'm getting too old to practice myself.

In the past ten or fifteen years, I think there's been more changes in Reno than there was in all the rest of the time that I've been here. Of course, all the rest of the time was gradual. You could see the changes. I recently came across some pictures here down in the basement, showing an old windmill across from the Riverside Hotel. There are several of those pictures, and they're over in the Historical Society now. But I don't remember when that windmill disappeared. It just seemed to disappear and a building go up here, and a building go up there. And the change has been greater, it seems to me, than it was in all that other time—the forty years.

It's probably a change for the better, although sometimes we like to go out in the store and greet people. It used to be, years ago, that you knew ninety percent of the people that came in the store. And now if I know ten percent of them, I'm lucky. People come

in and I see them, but I don't know who they are, see them a number of times. But in the old times it used to be that practically everybody'd come in the store where you knew them by name. I think the change has been for the better, generally speaking, because it seems that it's progress.

Sometimes I wonder about all these shopping centers that are going in, but they all seem to thrive. And still there's a certain amount of business downtown. I rather think that there will always be a downtown Reno. That's my opinion. On the other hand, you don't like to see all the business go out in the outskirts.

I know that some years ago, I'm going back probably twelve years, we had thirty-six doctors that were within three blocks of this store, and I'm speaking of MD's as such. Gradually, as the shopping centers sprung up and as people got more cars, there became less places to park and the doctors moved out where the people could park. They opened up offices where there was parking, and it would be no problem for them to park. Until the present time, this being in the

middle of May in 1965, we've got one doctor within two blocks of the store, and then within four blocks we have possibly another seven or eight doctors. But that's quite a change from thirty-six to one, in the period of twelve years. It's made a difference in our business. It's made a difference in the class of business that we do. I don't mean the class as far as the people are concerned, but in the way you deal with people.

For instance, we used to deliver on a bicycle. I had a boy that used to come after school and deliver on the bicycle. And then we had two boys. Finally, we got a boy that worked all day, went to night school. He still delivered on a bicycle. And then we got a Ford pickup truck, and delivered with that. Then people began to move out, and we had to deliver further out, so we had to get two automobiles for deliveries. Now we have three delivery cars. And it's just a change in the trend of the prescription business; not only prescription business—that applies to a lot of the business where people can't come downtown or don't come downtown. Then you make many deliveries out of the city limits as well as in the city limits.

But the change that has been in the business as far as prescriptions is concerned has been more marked than in any other part of the store, any other branch of the store, any other items in the store. I think this is due to the change in the location of the doctors.

And from delivery service where a boy would come after school and make the deliveries on his bicycle, now it isn't unusual for us to have 150 or 175 deliveries a day in the automobile. Of course, competition has brought some of that on, and the change, as I say, in the location of the doctors and a change in the location of the drugstores, who are in most of the shopping centers.

There's another thing that's been rather in our favor as far as business is concerned.

That's the fact that ten years ago, we had about eleven drugstores within two blocks of our store. Now we have two other drugstores. So as the people moved out and the shopping centers opened up, the drugstores also moved out as well as other kinds of stores.

I don't believe there would be room downtown for eleven drugstores again, but it's been a gradual change and as the other stores moved out and doctors moved out and these stores closed, you get a certain amount of business from each one. So it's maintained a pretty good balance, as far as stores are concerned.

Many years ago, the patent medicine business was a big thing. It's pretty hard to describe what a patent medicine is. A patent medicine, we used to speak of as anything that was asked for over the counter, used to be advertised, most of it was. How it got the word of patent, I'll never know, because most of the things weren't patented. The names were copyrighted, but somebody derived the name of patent medicine, and it's stuck all these years. You can copyright a name. You can't patent a formula, so there was no such thing as any patent medicine, but the name has stuck. Now we sell very little so-called patent medicines. There's a few that have survived all these years. You probably could count them on your fingers, if you took time to go over those that have survived all these years and still sell. Many of them would sell just tremendous quantities, and then in another two years or three years, they'd be off the market.

Outside of, I'd say possibly eight or ten of them which still sell in good quantities, the rest of them have almost disappeared. In their place we have toilet articles and many things like that, some medicines that are advertised and sold over the counter, but nothing in the quantities like they used to be.

There was a big part of the drug business, patent medicines of all descriptions and all kinds. Many of them now, they're not allowed to manufacture, because they had narcotics in them. Some of them had hypnotics and things that are not allowed to be used nowadays. But we probably had two or three hundred different ones on our shelves. One whole side of the store, I recall when I first came here, was taken up with so-called patent medicines. And now it's dwindled down to probably twenty-five or thirty of the so-called patent medicines. They still have a lot of liniments and rubs, and things like that on the market, which there has always been.

Internal medicines that are advertised to the public have become almost extinct. There are a few. Lydia Pinkham's Compound is still on the market. When I first started working in the drugstore, it was on the market, and it's still on the market. Still sells. Sloan's Liniment is still one of the oldtimers that sells. Doan's Kidney Pills, and Dewitt's Kidney Pills, I'm trying to recall some of the ones that are more or less the better sellers. There's lots of them that are still on the market that don't sell any more. Nature's Remedy tablets is another one that's still survived all these years, and still sells. Carter's Liver Pills are just not, I don't think it sells as much as it used, maybe more, I don't know, but we still sell lots of them. Caldwell's Syrup of Pepsin is still on the market, and still sells.

In most of the instances the formulas on those old-time medicines have been changed. The purpose for which they are taken is the same, but the government has placed restrictions and regulations on them and limits on dosage and all those things. They've had to change the formula to meet the government requirements. They don't advertise them with all the embellishments they used to, but they still advertise them. For

some reason, they still seem to sell, and a great many people swear by them, particularly the older generation.. I don't think the younger generation do, but the older generation, the older people still swear by some of the older medicines. Sometimes it's really interesting when somebody comes in and wants to buy something and they say, "That don't taste like it used to." You've got to explain to them that on account of government regulation they had to change the taste. You don't tell them they changed the medicine, they just changed the taste.

Then many of the old-time medicines that have been taken off the market, and mostly the reason they've been taken off the market is, of course, some of them died a natural death. They just quit advertising them, and that seemed to be the key to the sale of most anything. That condition existed for somewhere around twenty or thirty years. But a great many of them just had no value and the minute they stopped advertising, they died. But we had a great many of them that were made with morphine, and opium, and cocaine, and they were wonderful medicines, they just produced wonderful results. But the trouble with those things was that a person became used to taking them. They didn't know that they were becoming addicts, but actually they were. I can recall a number that had both cocaine and morphine, and people used to swear by them.

I remember many years ago we had Chamberlain's Colic Cure. The Indians weren't allowed to buy anything with alcohol in it, but the government issued a ruling that they could buy anything with alcohol in it, if it just had enough alcohol as a preservative. Chamberlain's Colic Cure put down the amount of alcohol in their mixture to five percent, which was allowable by the government. And the Indians really went



for Chamberlain's Colic Cure, because it had quite a bit of morphine in it. For a number of years, it was allowed until the Pure Food and Drug Act was passed. Then, of course, they had to take it off the market.

I can recall one time when I was working in Yerington. We were close to the Indian reservation over there at Schurz; Yerington was about the closest town. The only way for the Indians to buy anything would be to drive in from Schurz. And on Saturdays and Sundays they used to come in their horse and buggy and their buckboard and their flat wagons, and stock up for the weekend, or for the week coming. One of the things that they always wanted was Chamberlain's Colic Cure. We used to buy Chamberlain's Colic Cure for the drugstore by the gross. A great many of the Indians didn't have any money, and they had to have Chamberlain's Colic Cure. I started to make a collection of Indian baskets, and I used to trade Chamberlain's Colic Cure for Indian baskets. At one time—when I left Yerington—I had about three hundred Indian baskets, some of them were good, and some of them were just mediocre. Those old-time Indians, they were pretty good weavers.

With each one of the baskets, I used to ask the Indian for a translation of the design, if they knew it. A lot of them didn't, particularly the younger ones, but many of the old ones wove the design right into the basket, which meant something. The hunters have gone out after game, or they've gone fishing, or they've gone to plant the seeds to grow their different things. I kept track of that. Then when I went in the army, I said, well, I might not come back and I gave a lot of them away. I gave some of them to some people. They afterwards wound up in the Historical Society. But I gave all but just a few of them away. I was very sorry afterwards, because those baskets, for which I would trade a fifty-cent bottle of

Chamberlain's Colic Cure or a seventy-five-cent bottle of Chamberlain's Colic Cure, were priceless. Today you couldn't buy them made by the Indians for probably fifty, or a hundred dollars. I had boxful after boxful at one time. I just gave them away. Well, I had no place to put them to start with, no place to store them. I thought the best thing to do would be get rid of them. I still have a few of them.

The other day I was looking at one and I just happened to come across the translation of the design. I had written it on a piece of paper and put it down in the basket; it was a water jug. I had put it down in there, and I fished that out and it was quite interesting to note what this old squaw had told me some fifty-five years ago about what that design meant. The gist of the things was that the men had gone to pick pinenuts, and because she was too old to go with them, they left her there to take care of the small children and the babies, because the women—the younger women—went with them to pick the pinenuts. But she'd woven that in to the basket in the design, and that's what that was supposed to represent. How she translated it, I don't know, but that was her translation that she gave me.

They used to do a lot of fishing over there. That's in the early days. There was nothing at Hawthorne, and Walker Lake and those places hadn't been exploited as far as fishing was concerned. They used to weave a lot of designs that had to do with fishing, and with the particular kind of fish that they would catch, and the particular time of year in which they would catch the fish. In other words, at a certain time of the year, the big fish ran up the river to spawn, and at other times of the year, the Indians would go up the river to catch the fish, and then other times they would have to fish in the lake. That was all woven in designs, woven into the basket. These old Indians could tell you just what each design



meant. When the younger ones started to weave baskets, I think they followed a pattern or something, and there was no particular meaning to it. But the older ones didn't. They made their own design, and it meant a certain thing. Each one of the designs meant a certain thing.

At one time I had a basket that I thought was very, very nice. It was woven nice and I took it over to Carson to Dr. S. L. Lee, who afterwards was the one that more or less put Dat-so-la-lee on the market. I had him look at that basket, and he told me that the basket was worth five hundred dollars at that time, and that's many years ago. I don't recall whether I gave one or two bottles of Chamberlain's Colic Cure for the basket. I bought the baskets from a lot of them.

There is a basket I recall, and I don't recall the name of the woman that wove it, although I did have it. That basket had to do with the hunting trip. A great many of the hunters had gone because meat was getting scarce, they had poor crops. They had gone in the hills to hunt deer, to hunt sagehen, hunt anything that they could. This basket told quite a story about that hunting trip. I guess I should have kept more of them, I should have kept all of them, but I didn't.

The only one I have the notes on is just the one I happened to run across. And for some reason, I had put the description down in there. I don't know why I did that, but I just stuck it inside of this water jug. It's been now over fifty years, and that jug is still in perfect condition. Of course, it's never been used for anything, but it's still perfect. And the few baskets that I have left are still in good condition.

The one basket that I spoke about that Dr. Lee looked at, was afterwards in his collection of baskets. I gave it to a druggist in Carson and he gave it to Dr. Lee. He told me that it was very fine work, and that one of the real

old timers had made it. The funny thing about those, the dyes never faded.

We used to, once in a while, go down to Schurz, and watch those Indians make the baskets, and see them take those willows and split them with their teeth. That's how they used to split them. They would take them like that, and split the willows, split the bark from them, and make their own dyes and color them. It was quite interesting to watch them.

Of course, I was rather young then, and didn't pay too much attention, but I did on several occasions see them picking out willows. They would bury them for a certain length of time, and they had to be cured to a certain degree. When they were ready to be processed, they'd do it either with their mouth, with their teeth, or with their fingernails. Mostly when they would cut them, they would be with their teeth. They would bite them and then strip them like that. I don't remember the names of any of the Indians that I saw doing this. I did know at the time, but I just don't remember any of them.

When I first started the drugstore we made capsules, we made suppositories by hand. We made powders by the hundreds. It was nothing unusual to get a prescription for a hundred powders and a hundred capsules, sometimes even five hundred. It used to take a long time to fill them. Then many, many mixtures. We used to figure that twenty years ago we built ninety percent of our prescriptions. And it's just turned out now that we build about ten percent of them, and the rest of them are already built when you get the prescription.

Some people wonder why they have to have a prescription for certain drugs. You save more money for the pharmacist when he only has to put a label on them. But I don't think that's the question. And I don't think that's the answer to it at all. The answer to it is the

fact that many people would take medicine promiscuously, if they were able to buy it over the counter, and it wouldn't be the right thing for them to take. We had that demonstrated many, many times.

I recall once when a nurse bought some restricted medicine, and she almost died in Saint Mary's Hospital because she took the medicine. Somebody told her that they had the same thing as she had. It was rather disastrous for her, but she pulled out of it. Now the government is rather strict on those things. They check on them. I think it's a good idea. Some people are rather fussy sometimes. They wonder, "Why can't I buy this-or-that, over the counter?" We've always tried to operate what we could call an ethical drugstore, and that is to sell the things that are allowed to be sold; those that were not allowed to be sold without a prescription, not to sell any except on a prescription.

I think it's been very good for us. I think the doctors have confidence in our store. It's not that they don't have confidence in other stores, because most stores, I think, operate that way. There is some people that come in and say, "Well, I can buy this at some other store, I can walk two blocks and buy it," or "I can walk three blocks and buy it." It may be so, but at the same time, I think you feel a little better if you feel that you're practicing your profession the way it should be practiced. I imagine it's something they teach in school. You might make a few shortcuts, and not teach all the students, and not teach them all what they're supposed to be taught. It's a question of how you feel about it, whether you would feel right about it afterwards.

After all, as far as personally I'm concerned, I've made a good living off of the practice of pharmacy. On the other hand, that hasn't been the whole consideration as far as I'm concerned. I have rather felt that I am doing

a service to the community in operating the drugstore the way we have operated it.

(Just a sidelight on it that doesn't mean anything. As I understand it, ours is the only drugstore in the state that doesn't have slot machines. We have never had a slot machine in this store. I think today that it is still the only store in the state that doesn't have a slot machine. I play them sometimes, but I don't know, I just, I felt that I would try and make a living off of pharmacy, and see if we couldn't do it without the slot machines.)

I think it requires a better education now to work in a prescription department than it did years ago when you used to have to "build" a prescription. There were so many items—I don't know just how many items there are in the average prescription department, but it's somewhere around eight thousand items that they claim as in a well-stocked prescription department. The pharmacists now have to be just as well equipped to fill prescriptions as it was in the early days, when they didn't have near as many items, and the doctors didn't use near as many different things in the practice of medicine as they do now.

Years ago, the old-time druggist was more or less of a confidant of all his customers, and he was just like the doctor. I think he was considered an advisor, and the people came to him for all things. Now I guess the pharmacist is just another merchant in town.

I can look back over the last fifty years, and see the change in the attitude of people toward their pharmacists. I don't mean by that the pharmacist is not regarded as a good citizen or one that can be trusted, but then the old-timers, people were always coming to you and consulting you about this and about that and about personal matters, financial matters, which they don't do nowadays.

Some fifty years ago, even less than that, we'll say in about 1910, 1915, probably to

1930, people were used to herbs and leaves and roots and dried drugs of all kinds. I can recall looking back, some years ago, in this store where we had possibly two hundred boxes with all kinds of herbs in them. When I speak of herbs, I mean leaves, roots, berries, barks. We called them herbs although they weren't all herbs, but they were a part of the plant, some part of the plant from which they were obtained. Nowadays, they don't use those very much. We have possibly ten different ones. Those ten, more or less, are used for flavoring or coloring or something like that. I don't believe any of them are used to make medicines out of. That is, for the people to manufacture their own medicine. In the old times that's what they used to do.

Many books on the market told what to get, and how to treat diseases. Every home had one of those books. And a good many of them used them. They'd get the different mixtures, different herbs and things, and mix them up themselves—boil them and decant them. It's a lost art as far as the general public is concerned, and as far as the drugstore is concerned, too. Some of the newer drugstores that open up, they don't even carry those things nowadays. Even while ours is very limited, we still do carry them, because many of the old-timers still buy a few of them.

They used to have medicines they called embrocation. They were either external or internal. They worked either way. I remember the dosage on them was rather small, because they had quite a bit of morphine in them. But externally you could rub them on as much as you want and they'd really relieve pain, because they rubbed that morphine into the skin and got results from it. Of course, that's before the government stopped all of that. Of course, the Pure Food and Drug Act passed in 1906. However, the government really

didn't crack down on the putting of drugs in medicines until quite some years later.

I recall in the early days over in Ely, when I was working in a drugstore over there, that we made our own ice cream. There was a few so-called addicts—we called them "hop heads"—around. They were always trying to get morphine. It was quite a job to clean up that ice cream factory where we made the ice cream. We had a little house out in back of the drugstore where we made the ice cream. It was our store room, and where we stored the extra. We stored it in ice and we had to salt it down. We didn't have any ice machines at the time. To get this hop head to clean up that ice cream place, we'd give him a cube of morphine. He'd work two or three hours for that cube of morphine. In those days, it was comparatively cheap. There was really no restrictions against giving it to him. The only thing the law said was that it was against the law to sell it on the open market. But there was such provisions in the law that if a person was an addict, you could accommodate him, let's say. There was no restriction as far as the doctor was concerned.

A great many of these people had been on—usually morphine for many years. When they would need morphine, for twenty-five cents they could buy two cubes of morphine. A cube of morphine was about a half a dram. Just about thirty grains. That thirty grains would last them a day or two, unless they were pretty hard on it. We used to sell it, in the early times when I first went to work in the drugstore in 1909.

As I say, there was a Pure Food law, but there was no enforcement of it, and there was a lot of loopholes. If you really thought that they needed it and they couldn't get by without it, you sold it to them. Of course, they began to tighten up on it afterwards. These medicines that I speak of were in the

same category. The law said there should be some restrictions on them, but they didn't spell out the restrictions, and there had been no regulations established for how much you could put in anything. The label had to say "guaranteed under the Pure Food and Drug Act." If the label said that, you could put most anything in it that you wanted. They *did* put anything in they wanted.

Some years ago I found an old bottle downstairs in the store. That bottle had been down there, up on the rafters for years. It was a preparation made by Abbott and Company, who are now one of the outstanding pharmaceutical houses, and they still make the preparation called Calcidrine. There was nothing that this Calcidrine couldn't cure, nothing; it cured tuberculosis; it cured consumption, it cured cancer, it cured syphilis; it cured gonorrhea. There was just nothing it wouldn't cure. Thinking maybe Abbott would like that bottle, I mailed it to them. They were very happy, because they hadn't saved any of the old bottles. I just don't know of anything that that wouldn't cure at the time. It was "guaranteed under the Pure Food and Drug Act," so that made it legal to sell it for anything. What that guarantee meant, I can't tell you, because that was the only requirement—that it was guaranteed under the Pure Food and Drug Act.

Of course, that's in the early days of the Pure Food and Drug Act. Now it's to a point where the government really watches those things. And over the years I can recall twenty-five or thirty items that the government has called in, and made the people take it off the market because of faulty labeling; not from the ingredients that are in it, but because the labels were not specific enough, or the labels claimed something that wasn't true. And that even goes down to the present day.

We just had a deodorant recently that the government had requested this company to discontinue the sale and to call in all the deodorant they had, because something in the labeling was against the provisions of the Pure Food and Drug Act. They did. I guess they sent a letter to every outlet that sold it and called it in, and then replaced it—or will replace it—with the same formula, but just something that complies to the law.

I saw the cans in the old McCullough Drugstore, which was Cannan's Drugstore until recently. This is, of course, before Mr. J. Clyde Cannan's time. When they remodeled that store, they had a big attic up there, and they didn't use it. They got up there to take the things out of the attic, and they found possibly a hundred 25-ounce cans that had morphine in them. In the early days, of course, it was legal to sell that. There was two or three firms that made it. There was Powers, Whiteman, and two or three of the other manufacturers of chemicals.

I recall that the man that had the store at the time called me on the phone and asked me if I would like to come up and see something. I went up there and here was all these cans, empty cans of morphine. Under the price at the present day, why, there would have been possibly two or three hundred thousand dollars worth of morphine. The price of morphine in those days was so cheap that, as I say, we sold two cubes for twenty-five cents, and two cubes weighed an eighth of an ounce. So that would bring an ounce to about two dollars. I think at the time we used to pay about thirty-five, forty cents an ounce for it.

In those days heroin wasn't on the market. Heroin was a later development of the narcotic group. Some of the other breakdowns of opium, besides morphine, are later developments. The early development

was in morphine, and that was the original narcotic that they obtained from opium. There was twenty or thirty salts that are derived from opium, most of them narcotics, but morphine was the original one.

I recall that we used to sell opium. It was legal for a doctor to write for opium, and some of these early addicts liked to prepare their own opium, and smoke it like the Chinese did. Some of them made it into pills and chewed it, just like you do snuff. They would heat it, and prepare their opium—made little balls out of it, about half the size of these penny gumballs. Then they'd chew that for the morphine that was in it.

I recall quite a number of those old-timers that used to get prescriptions filled for opium. There was no restrictions for the doctor to write it. There was nothing. A doctor that would write a prescription for morphine or opium, he was just in his ordinary line of practice. He didn't think anything of it. Nowadays, the doctor that writes a prescription for anything like that always looks at the patient twice before he writes anything. But in those days, if a patient went in and wanted some opium, the doctor wrote a prescription for it. There wasn't anything thought about it. It was just in his ordinary line of practice.

I don't think there were a lot of addicts. There was quite a few, but there weren't a lot of them, let's put it that way. I don't think too many of them became addicts in the use of these medicines that were on the market, because after the law was passed and they began to cut down the amounts and things, and restrict the sales, people couldn't get it. They would buy something else, not knowing that they had been taking narcotics. But there was some. I don't know what to say as to the numbers, because I don't know.

I do recall that many years ago, I worked over in what is now Hale's Drugstore. It was then Weck's Drugstore. We had quite a few of them that used to come in there. Not near as many as we do nowadays. Nowadays we've got them every day and every day, coming in trying to buy one thing or another for the narcotic content. Then, there was some, but the numbers, of course, weren't anything like they are now, hadn't become prevalent like it is now. Mostly men, there was a few women, but mostly men. I would say ninety percent of them were men. It has changed a lot now.

Over one Memorial Day weekend, we had a rash of them in here, to buy anything that had codeine or morphine. I'm telling you, that Sunday and Monday was the worst I've ever seen. There's certain cough syrups and things that have a small amount of codeine and a small amount of morphine or opium or something in it. And by taking enough of that, they can become what they call "high" on it. And they get a kick out of it. It's really got to a point where we have to be on the lookout all the time for these people, to differentiate between somebody that has a cough and somebody that comes in and just makes believe they have a cough. They're having a lot of trouble in California, but we're beginning to have a lot of trouble here.

I talked to two or three of the pharmacists in town, and they told me the same thing—that that Sunday and Monday was the worst they've ever seen for these young people to buy something to get a kick out of.

One of them asked me for several different things and I didn't, no, no. He said, "Do you have any turps?" "Oh, yes," I says, "We've got turpentine." "Oh," he said, "You know I don't mean turpentine." They called a mixture of terpenhydrate and codeine, turps. I told him we had turpentine. He didn't want turpentine.





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## MEDICAL MEN OF RENO

I think the doctors have changed, possibly just as much as the medicines and the practice of medicine due to the fact that, at the present time, there are very few what we would call general practitioners. The old-time doctors were general practitioners and surgeons. Very few of them specialized in any one thing and adhered to that specialty. Some of them would specialize in surgery, you might say, but still they would take general cases, and do almost any kind of medical practice. Nowadays, the doctors are most all specialists in one way or another. I think maybe the people get a little bit better diagnosis, a little bit better treatment, better medication, and particularly in surgery, I think they get probably a little more specialized surgery. Still, the old-time doctors used to do everything and they seemed to do everything pretty well.

I like to look at the older doctors as more or less pioneers in the West. I think that if it hadn't been for the devotion to their profession that the older doctors had that many, many people would never have lived

and never would have pulled through a lot of serious sickness, because I just don't recall of a time up 'til twenty, twenty-five years ago when a doctor would refuse to make a call regardless of the time of day or night. They'd always be willing to go.

I recall many years ago that when Dr. A. L. Stadtherr had been in Reno just a few years, he got a call from up north near Pyramid Lake. He'd only been here a short time. He didn't know the road. Having been here many years, I knew the road, knew how to get out there. The man that came in to get him was so tired he couldn't go back. So I went with him and it took us seven hours to get out to where this baby was sick. Thinking in advance maybe he'd need some medicines, we took quite a number of different medicines with us. I think he saved the baby's life and the child afterwards got well. But we had to take a couple hours sleep after we got there before we could drive back, because it was really a hard trip. It took us seven hours to go out, and I think we came back in about six hours, because it was in the

daytime when we came back and it was a little easier to follow the road.

I knew Dr. Henry Bergstein. I can go back many years. Dr. John Lewis was one of the old-timers. Dr. J. E. Pickard was one of the old-timers. Dr. John Sullivan, one of the oldtimers. Dr. M. A. Robison and J. L. Robinson, and Dr. S. K. Morrison, Dr. William Samuels. Dr. John Tees, I think was the first specialist outside of an ear, eye, nose and throat man that I recall coming to Reno. He came from the East someplace, and he was a pediatrician. Up until that time, we didn't have many specialists. Dr. George McKenzie specialized in surgery and he was one of the real old-timers, but he did general practice, too. Dr. Tees came, and he specialized in pediatrics. That's the first I could remember. I remember when he opened up his office and he told us he was going to specialize and take nothing but children, well, we thought he was crazy and said, "The man will starve to death." But he managed to do a pretty good business.

Since then, the practice of medicine has changed an awful lot. Now it has come to the point where there are very few general practitioners. There are a few. A few of the general practitioners don't do surgery. They turn their surgery over to some of the specialists in that line, and they take nothing but internal cases.

And then we have the ear, nose, and throat man and the eye man. It used to be that they would group all four of them and now most of them, they either specialize on the eye or the ear, nose, and throat.

The pediatricians take the children from after they're born up 'til possibly ten or twelve. Then we have the group that specialize in treating the women, and then some that take only women before childbirth.

The medicine has changed so much. And I'd say maybe it has changed a little more

than pharmacy has, because practically every doctor, every MD, that you know now is specializing in something. Sometimes it's a little discouraging to the patients that they can't go to one doctor for everything. They have to get one doctor for this and one doctor for that. I think on a whole it's a very good change. I think it has advanced the practice of medicine in those particular lines over the last fifteen years, more than they advanced the fifty years before that. The men tried to do too much. They tried to cover too large a field, and it just could not be done.

Now I don't think the cost is any more. I think in the long run the cost of medical care, and the cost of prescriptions, hasn't increased a great deal. But the basic cost has. What I mean by the basic cost is that prescriptions can certainly cost more now than they used to. In other words, we figure that it costs a certain amount to fill a prescription, just to label it and get the box and the bottle or whatever it may be, and enter it into your files. There's a basic cost to that. The average cost, without any profit, at the present time is figured at about forty-two cents. We used to fill prescriptions for fifty cents and seventy-five cents, and now we have forty-two cents investment before we start to fill the prescription. That doesn't allow any profit and it doesn't allow any time for the man, just the cost to fill the prescription without figuring his time.

And that's the same way with the doctors. Their cost has increased and their cost of education has increased, but I think you'll find that you take less medicine and I think you'll find the average person sees the doctor less than they used to. I think you get better treatment and better service, and the doctors treating specific things know more about that than they did in the past.

I remember one incident that Dr. Tees told me about. He went to a house. He had



told them to get a certain kind of milk. And in those days milk was milk. It was delivered to your door, and that was supposed to be milk. But for some reason, he wanted this particular dairy milk for this particular child. He went in the home and went in the kitchen, and there was six bottles of milk sitting on the sink. He swept them off with his hand into the sink, and they all broke. The man of the house grabbed him and took him to the front door and threw him out and threw his bag after him. The doctor told me that himself. He said he was so mad when he saw they hadn't followed his orders that he just swept it all in the sink. So I guess these was trouble in practicing medicine in those days.

There was another old-timer, A. Parker Lewis was one of the old-time doctors. They had three classes of doctors. There was another one, John Martin. We had the eclectic doctors. Dr. J. W. Gerow was an eclectic, as we called him. And then you had your homeopathic doctors, of which John Lewis was one. And then your allopathic doctors, which are the regular doctors that were educated in the regular schools.

The doctors that were one or the other of two classes, the eclectic and the homeopathic ones; they didn't stay entirely to the medicines used by them. Homeopathic doctors used homeopathic medicines, which, by the way, have passed entirely out of the picture. And your eclectic doctors, they got their medicine from almost entirely one manufacturer. They were called "specific medicines." They didn't practice entirely by the use of those. They used to get over into the allopathic preparations, too. There was very few of the homeopathic ones that I knew of in Reno. I think John Lewis was the only one, although we did have several of the eclectics. The strange thing about it is the results that they used to get. They were just as startling as the

results that they got in the ordinary practice in medicine.

I used to hear some of the doctors say, "What does he want, to use that stuff? There's no medicine in it." That's in your homeopathics. The average strength of the medicines was 1/100th of the strength of the regular medicine. And yet the results that they used to obtain from those things, you wouldn't believe it.

Sometimes we used to make fun of them. Just a little instance; one time John Lewis had been in the store, and he had written a prescription for homeopathic belladonna. There was another doctor in the store, and after Lewis had gone out, he made a remark about, "It wouldn't hurt you if you took the whole damn bottle." I said, "Well, doc, it might." He says, "I'll take it and show you." And he took the whole bottle and dumped it out in his hand, it was in pills, and he took the whole bottle. There were no results at all. Didn't even get any reaction for the belladonna. And yet, your homeopathic doctors could treat cases with homeopathic preparations, and get startling results. Results that you wouldn't believe were possible with the strength of the medicine.

I sometimes wonder why they disappear, but as I understand it, there are no homeopathic schools left. There is a place in San Francisco that still manufactures a few homeopathic remedies. Those that can be sold over the counter, they still manufacture, but it's getting less and less all the time. And in a few years there won't be any such thing as homeopathic. And there's no eclectic schools left. They've all disappeared. They're all what we would call allopathic, or your general practice in medicines, in which they use all classes of prescriptions and all classes of medical preparations. They're not confined to one manufacturer or one strength of medicine.

Dr. Bergstein wasn't here too long after my time. I knew him and used to do some business with him, though. Dr. George McKenzie was a noted physician, noted in Reno, noted all over the West Coast as an outstanding surgeon. Dr. A. L. Stadtherr came right after the first war. I recall the first day he came to town. He came to go in with Dr. McKenzie. In the meantime, I had returned from the army and McKenzie brought Stadtherr in and introduced me to him. That was on a Saturday. We went fishing the next day. We became friends, and we were friends all the time he practiced medicine. He just passed away recently in Salt Lake City. He'd been sick for quite a number of years. I thought he was a wonderful surgeon and a wonderful, understanding man. I think half of Dr. Stadtherr's success, as far as his patients was concerned, was his understanding of the people and the people's understanding of him. He just, I don't know, had bedside manners that made a person well even without medicine, sometimes.

Dr. A. Parker Lewis was one of the old-timers that had his own hospital, right at the top of Ralston Hill. He was a wonderful man, a surgeon, general practitioner. He was of the old school. And Dr. Pickard was of the old school. Dr. Pickard didn't do any surgery, but he brought Dr. C. W. West here and Dr. West did the surgery for him. Dr. Pickard was an internal man. Both Dr. West and Dr. Pickard were, to me, very wonderful doctors. I'm very friendly, and I like a lot of the doctors now, and am very friendly with them, and I like them just as well as I did the old-timers. But the old-timers had the feeling that they—the patient felt that the doctor really took an interest in their case. I think they do just as much now, but they don't have the time to give to the patients that they used to give.

Well, of course, there is one thing about the doctors nowadays, and this applies

to the druggists, too. We only work forty hours a week—that is, not the boss, but our pharmacists only work forty hours a week. And I think most of the doctors try to do the same thing. Years ago, eighty hours was nothing. You felt that he was on duty sixteen hours a day, and not eight hours a day. I think your old-time doctor did the same thing. In the middle of the night if you called them, they got up to come, if you were sick. I don't blame the doctors for not doing it now, because half the people that think they're sick, are not sick anyhow. The doctors don't like to get out in the middle of the night. The old-timers had a little different feeling towards their patients.

Dr. Lewis' hospital was a small hospital, located at the top of Ralston Hill. He called it the Reno Hospital. I think it was about a ten-bed hospital. He operated it himself. After he operated it, a man by the name of Dr. Edward Carl Galsgie took it over and operated it and Dr. Lewis passed away. He was an osteopathic physician. The building is still there. I think it's a fraternity house or something now.

Of course, St. Mary's Hospital was over where the convent is now. And that was just the three floors and the one building. That housed the hospital and the operating room, and the sisters and the personnel and everyone lived right there.

The first time I went to the hospital, I remember I got the red carpet treatment. I was in the room for emergency, out on the street. That was something then because I don't believe they had over thirty rooms at the time.

Dr. Morrison was a very, very colorful character. He was a very, very charitable man. He took cases they didn't think they could pay for. He didn't even send them a bill. Of course, there's others. Dr. Sullivan told me that. People come in and paid him, why, that

was swell. If they didn't pay him, he didn't send them a bill.

Dr. Morrison was a very, very colorful man. He was noisy sometimes, but his patients liked him and thought the world of him. He was very much interested in civic affairs, much more so than a lot of the other doctors. I remember that he never missed a football game at the University. Then he'd go to the high school football games and basketball games. He was always interested in something at the schools. I think Dr. Morrison bought the Reno Little Theater. I'm sure he did. They were having some financial difficulty, and he bought that building and gave it to them.

Dr. Sullivan's wife told me one time that she didn't know when he had turned down a call at nighttime; that it made no difference what time it was, he would get up and go on that call. She told me about a case that he had, a family. He had delivered five children in the family, and they had never paid him a dime. One morning at three o'clock, the man called him up. The doctor didn't even know that there was another baby expected in the family. The man called him up and asked him to get down right away; that his wife was in labor and she was going to have another baby. He got up—his wife told me this—and he went down to that family that lived way out by the racetrack, delivered that baby in the house, and had to stay there two or three hours with the baby because he hadn't seen the woman—had made no preparation, or anything. Then he got through, the man gave him ten dollars and said, "Doc, I'll give you some more as soon as I can." And that was the sixth baby he had delivered, and the got ten dollars for six of them. He was that kind of a man. He wouldn't have turned them down if they had another one. If they'd called, he'd have gone.

I think the druggists were more or less in the same position. We used to try and get

money out of the people that sometimes owed us bills and they'd get sick and we'd still give them more credit, more money. In those days we didn't have credit bureaus and things like that. We didn't have collection agencies. We'd lost a lot and yet we made a lot of friends. That was something to think that some of the people, even if they did owe you money, they were still friendly. I don't think that's true nowadays. When they owe us money, we get after them. Then they get mad about it.

Dr. Morrison and Dr. J. L. Robinson and Dr. Samuels and another one of the old-timers, Dr. J. Hardy; they used to have some good times, and they were very wonderful and civic-minded, all of them. They used to sit sometimes in the back room here at the old drugstore, and I'd have to put them down in the cellar to keep them from making too much noise. Sometimes they'd get down there and the party'd last for several hours. We'd have sometimes as high as ten or fifteen doctors down in the basement. After we remodeled the store, I put this office in. I'm sometimes just afraid the thing is going to break down, because we have so many of them up here.

Sierra Street in the early time wasn't open clear through. They used to come through the store; they'd park their cars over on Sierra Street, because there was always room over there. And they always came through the back of the store, because there was a couple of houses over here and there wasn't any fences and you could walk right through. We had a good many doctors that lived downtown or that had offices downtown. They'd walk through the store after their office hours, and this was kind of a gathering place for them. As the years went on, it got to be more of a gathering place.

Some of the things that went on, maybe it wouldn't be good if we put them down in the tape. At least I think some of their folks

might not like it if I told some of the things that happened. Nevertheless, they were fine men and wonderful people to be associated with. Just wonderful people to know, and wonderful citizens. Anytime anything came up that you needed to take up a collection for any civic thing, there used to be a time when your doctors were your main source of supply. You went to them first, and you always got donations from them for everything. I can remember many times when they'd be collecting for something. Somebody'd come in, and ask me if one of the doctors came through, if I'd ask him if he'd help with this or help with that, you'd always depend on them to. They were going to be right there. They were going to give you whatever you want, whether they knew anything about it or not; it didn't make any difference. They were just, well, I guess you'd call them the salt of the earth. Not that there aren't many of them at the present time, but the conditions are so different that you don't come in contact with them that way.

I remember a few years ago we had a drive or something, and they asked me if I would take the doctors to try and collect from them, and I did. Let me tell you, it took me about three weeks before I could contact, and this is some years ago when there weren't near as many doctors as there are now. It took me three weeks before I could contact them, and another three weeks before I could catch them in their offices to collect from them.

I'm not criticizing the doctors as to what they do or their ability to give or anything, but I don't think we have—and this applies to pharmacists, too—I don't think we have enough of them that actually take an interest in what's going on in the community. I don't, I really don't think they do. I think that the doctors should have more interests and the pharmacists should have more interests, too.

I go to some meetings sometimes that I just wouldn't miss and don't see the other pharmacists there. I went to one recently. It was a "coffee break" at the Holiday Hotel, which I thought was of importance enough that I wanted to see what was being said by a couple of the candidates running for city council. And I was the only pharmacist that I could see there. Others were not even there. They might be interested, but they don't take the time to show it.

Another doctor I would like to mention is Dr. W. H. Hood. He was one of the old-timers who had two sons who both became doctors. Both practiced in Reno. One of them just recently retired, and the other one is still in active practice in Reno. He came to Reno from Elko. I don't know just when he came here but it was really in the early days. There was very few drugstores in Reno when he first came. He passed away several years ago. He was a general practitioner. He was just one of the old-timers that would go out day or night; no matter when they called him, he went on the call.

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## THE SHRINE CIRCUS IN RENO

The Shrine Circus was conceived by a group of Shriners, of which I was in on the original plans. Judge Merwyn Brown of Winnemucca made a trip to Chicago and contacted the Pollack Brothers Shrine Circus. It had been put on in Reno two years before, by the Lions Club. The Pollack Brothers weren't completely satisfied with the results, so the next year they didn't have it. Then the following year, we decided to try and get it for the Shrine. Judge Merwyn Brown made a trip to Chicago and we signed up the circus for one year.

The first year, there was three co-chairman, myself, Les Lerude, and Red Linabary. It was rather cumbersome having three chairman, because we had nobody in authority over all, so the second year I assumed the chairmanship and the others were working under me. I kept it all but one year and that was the year I was Potentate in 1953; that year I had another member as chairman. And after that I was chairman up 'til 1963, when I resigned as chairman because

I'd had it for fifteen years, and I thought that was long enough.

From the start, it was a success. It was a success because everybody worked for it, and not because I was chairman. It was a wonderful experience, having all these Shriners willing to work and doing work. Another reason it was a success and that we made money out of it, was the fact that all the labor put into it was put in by members at no charge. All of the profit that was made out of the circus went to the Shrine crippled children's hospital. Up 'til two years ago that was true. All the profit that we made was sent to the different children's hospitals, and not all to one hospital. We sent some of the Mexico City hospital, a hospital in Honolulu, one in Los Angeles, and the one in Salt Lake City.

Two years ago, they decided that we had to have some for the members of the Temple, some of the proceeds, because they needed new uniforms and things like that. So part of the money the last three years had gone some towards the Temple, and still mostly

goes to the crippled children's hospitals. A small percentage is kept for the members themselves, for the units, not the members as individuals, but for the different units. It was a very rewarding experience, because of the cooperation that everybody gives you in putting on a circus, not only the members of the Shrine, but the public as a whole.

The bringing of up to 5,000 children into the circus at no expense to them is really, in itself, quite a project. We have brought as many as 5,000-6,000 children to see the circus in a single year. Up 'til two years ago, we brought a thousand each year from Winnemucca and the points between Winnemucca and Reno on the Western Pacific train. That train had national publicity on radio and television and the *Saturday Evening Post* and *Life, Look*, magazines. *Life* published one issue in which several pages were devoted the Shrine Circus train from Winnemucca, with pictures and descriptions of it.

It got to a point where we couldn't bring a train any longer. The Western Pacific couldn't supply the equipment and couldn't supply the cars, so we had to discontinue that the last two years. However, we still bring about 5,000 children in; a great many from the Lake Tahoe area and from all over the valley here, and Carson, Minden, Bridgeport. For a number of years, we brought a great number from Susanville and Westwood, but Ben Ali, the Temple in Sacramento, now puts on a circus in Susanville, and the children up there go to that circus.

Of course, Reno's been increasing in population, so we have just as many children going as we ever had. This last year, about 5,000 children went to the circus at the expense of the Shrine and the Shrine Clubs.

I knew most of the performers by their names. It was necessary to do, not the

physical work, but to be in contact with the performers. Being chairman, you have to actually supervise the putting on of, not the acts themselves, but the order in which they go on, and the parking, and all those things. It becomes a pretty big job, and it becomes a job that takes about thirty days' time, in which you can't do much else but work on the circus.

Many of the performers are from the old country, from Europe, and some of them from the Orient, some from South America. As a rule, they're very fine people. Many of them are well-educated people, I'd say—not the ones that travel with the circus as help, whom they used to erect the different things that they put the acts on; I'm not referring to those. The performers themselves ordinarily are high-class people. A great many of them are well-educated. Most of them travel in cars, and a great many of them have their own trailers and live in trailer parks when they come to town. On the other hand, quite a number of them stay in the better hotels. The better acts, most of them travel in their own cars, but stay in the hotels. Several of them stayed in the Mapes and Riverside, the Holiday, and then some of them in the better motels. As a rule, I find them very high-type people, and very fine people to talk to. I got very well acquainted with them. They're very friendly.

A man by the name of McDonald (I never knew his first name—-we called him Mac) and his wife were the trainers of the elephants for a number of years. I got very well acquainted with them. I was surprised to find out that both he and she were college graduates; had graduated, she in Austria and he in Germany, from college. He is now retired and they have a new trainer. But from the time that Mr. Louis Stern bought the elephants until last year, McDonald was with them constantly, even in the wintertime, when



they take a month's vacation. They generally winter in Kentucky or someplace down there, and he would stay right with the elephants and just a few days off at a time. He told me once that for about eight years, he wasn't away from him for over a few days at a time. But they're very high-type people. The man that's the trainer now has worked with elephants all of his life. He's from Europe also. He has a college education, too. Very surprising, the number of them that are college graduates.

The younger ones have traveled with them; they've traveled with the troops and things. They have a school that goes right along with them. The younger ones go to school and are educated. As they get a little older, they put them in school. But I'd say ninety percent of them are well educated. That is different from the general public conception, and it's surprising to find that it is wrong. The general opinion of them is that they are just performers and that's all. But that's entirely wrong.

One of the performers that came here and performed on that pole that they have—I don't recall what they call it—but the pole broke about three weeks after they left here and killed him. It went clear through his body. They have an instrument in which they test the steel in that, and evidently the instrument was off or something, because whenever the steel begins to crystallize, they change poles. And evidently the machine that they test it with was wrong, and the pole snapped when he was in the air.

But they're very careful. When they have a net under the high wire act, they don't draw near as much salary as when they perform without nets, and so that's the reason why most of them perform without nets. It's forty percent less, I believe, if they perform with a net. That's about the figure. And they get so much more if they perform without

nets. So that's the main reason why they used very few nets in the high wire act.

One group that we had, they were Italians, bicycle riders, the high wire bicycle act. They were very, very high-type people, and very well educated.

We've had no accidents here at all, but in other places they had some bad accidents. We were always very fortunate here. In sixteen years of performing when we were outdoors, we lost one act by weather and that was the last act on the last night at one show. That time, it began to rain, and we had to cancel one act out. Of course, in the contract, you have so many acts that you contract for, and ordinarily they have two or three extra acts. As long as the weather is good and no trouble, they put them all on. However, in the contract there's always a little leeway that if they have to cancel one or two acts for some reason, you still pay them for the full show. And, as I say, surprising in sixteen years, we lost one act. And that was the last night at the University—Mackay Stadium—that it had begun to rain on a Saturday night, and rained out the last act. So we were always very fortunate. Of course, now in the Coliseum it doesn't make any difference.

We were very proud of one thing that the Shrine Circus did, and that was we put the lights that lit Mackay Stadium; they were paid for by the Shrine. Most of the money that paid for that did not come from the Shrine Circus itself, but from Kerak Temple—their activities outside of the circus. As I say, most of the money went to the Shrine crippled children's hospitals. We spent \$40,000 on those lights, and we sure hated to see them go, but I guess progress is progress, and we have to go along with it.

We did many other things at the University besides put in the lights. We put in the drinking fountains, and we paved the area

outside of the Mackay Stadium. And we put in the stands, where they served their drinks and things, concession stands. We built those, and put in the drinking fountains, besides putting the lights.

Then there was many other things that the Shrine did outside of that. We bought the organ that was in the music department up there. The Shrine bought that organ. We also bought the bookkeeping machine that was in the office. Those were just some of the things that were incidental to the circus. We felt that since we paid no rent directly on the field, we had to do something to warrant them letting us use it. Each year after we had put the lights in, we did something to improve the University or the physical part of the University, physical assets. I think the cooperation that we had from the University and from the heads of the University, from the Regents, was always very fine and always the best. We hated to leave the University, because the Shrine Circus had become an institution.

In some places they have big tops, so-called, and their tent operations, but many places they show outside. But most places now, they'd rather show inside. You get away from the, any chance of bad weather, and wind is a thing that bothers the high wire acts and those things. In a closed, covered place, we don't have that to contend with. And then, of course, it's much easier—your seating arrangements and ushering becomes much easier—in a place like the Coliseum.

The Coliseum is an ideal spot for it here. The height and everything is just right. Many places they perform inside, They have to eliminate some of the high wire acts because they're too high for their ceilings. Here at the Coliseum it worked out very fine, and everything could go on.

I'm not directly involved in the circus now, but then I still work in it and do a certain

amount of work because I enjoy it. We still have the ticket sale in the store. If I don't do anything else, I can sell tickets. Selling tickets gives you a good insight into the psychology of people, and the way people think. You see a different side of people in selling tickets than you see any other way. Each one seems to think he knows where the best seats are, and what row they're in, what aisle you should sit on. All you have to do is make them think that they're right, and you have no trouble. It's really surprising the number of people that come in. They want a certain seat that's in a certain row in a certain aisle. Sometimes you talk them out of it, because they might be sold for that particular performance and sell them something else. But as long as you let them think they're right, it makes no difference what seats. As I say, it gives you an insight into people and their way of thinking.

Well, that's true in retail selling all the way through. We used to say that the customer's always right, and you always agreed with the customer. I don't think that's a general opinion any more, and you don't hear that expression very often—the customer's always right—because many times the customer is wrong. The psychology in selling is to make them think they're right at least, and to satisfy them that you're doing things their way, or what they said is right.



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## ACTIVITIES AND OBSERVATIONS

The Elks lodge, as far as I know, has been in Reno for many years. I couldn't tell you just when it was established, but I've belonged to the Elks lodge over fifty years. About two years ago, they presented me with a fifty-year pin. Two or three that still belong have been in longer than I have. There's not very many that are still alive that have been in the Elks lodge any longer than I have.

I've been in many organizations and on committees and things. At one time I was campaign manager of the (then) Community Chest. I was president one year, and acting president for another half-year, when Fred Herz was president and he was sick. He had a heart attack and had to be away. I was acting president before I became president for six months.

I was on the original committee that organized the Community Chest, and there was just six or seven on that committee. When the United Fund took over from the Community Chest, I was chairman of the organization that set up the United Fund. When I was chairman, we drew up the bylaws

as they are now of the United Fund. I was the only one on that committee that was on the original Community Chest committee. Practically everybody that was on that Community Chest, the original committee, have passed away, and so I was the only one left.

I was interested in the rodeo. I used to sell the tickets to the rodeo. I handled tickets for about fifteen years for the Reno Rodeo. The ticket booth was always set on the sidewalk, out in front of our store. I was out there in the ticket booth one day, relieving one of the men that was selling tickets, and Joe McDonald, who at that time was editor of the *Nevada State Journal*, came up and said, "We want you to be a member of the Community Chest. We're going to elect you director." I accepted without ever thinking about whether there was any work attached to it or anything. That's how I became a member of the Board of Directors. And then two years later, they elected me president.

I have been interested in that kind of work all my life, and that's one of the things

that I still am interested in. I'm still interested in the United Fund, although I'm past the time when I can do any work on it. It's been a very gratifying thing to know that the Community Chest and the United Fund have been successful, and I think they *have* been successful. They haven't always raised their quota, but they've been very successful, and I think they've done very good work in this community. I'm rather pleased that I was able to do some hard work in both of them. And I did put a lot of work in that. I put a lot of work in the United Fund when they organized it, because we had a little tough time getting it started. The Community Chest went off with a bang when we got that started, but the United Fund wasn't so easy to get started.

There was quite a bit of opposition to the changeover, due to the fact that we were taking in Sparks and Washoe County. That seemed to be the thing that we had to overcome; the fact that we were broadening the scope, and we met opposition both in the county and in Sparks. But after it was organized, both the county and the people of Sparks became just as enthusiastic as anybody about it, and I think they still are. I think they thought that most of the problem was created in Reno.

It used to be the general opinion that gambling caused the problems that we had in the welfare—not so much the character-building organizations, but the welfare organizations. It was the general opinion that the burden on them was caused mostly by gambling, and since most of the gambling was in Reno, the people on the outside—particularly in Sparks and the county—thought that Reno should carry the burden, since they caused the trouble. I think that's been dispelled quite a bit, though. I don't think gambling causes any more hardships or any more necessity for the welfare organizations

than any other community, but that hasn't always been true.

Retail selling in itself, to me, is the most entertaining thing. I still enjoy it after over fifty years in retail selling, and I still enjoy waiting on people. I suppose I should retire and quit, but I don't know, I think I'll always enjoy meeting people and particularly in selling.

The funny thing is, so many times you can pick types out. Before you wait on them even, you have an opinion of what they're going to be like to wait on. You're not always right, but a great many times, you're right. The way they approach you, the way the people approach the clerks. Sometimes I don't wait on them, but the way they approach the clerks, you form an opinion of what they're going to do, and what they're going to say, or how they're going to be to wait on, whether they'll be easy to wait on or hard to wait on. And it's not too often that you're wrong, because, I don't know, you get so you can pick out the different types and the different way that they'll react to clerks and to myself. I've enjoyed it so much and I still enjoy it. I like to wait on people, after I have formed an opinion. When they walk in the store, I form an opinion of what they're going to do, not particularly what they're going to buy, but the way they're going to react.

You have some types come in that you know they're going to tell you about the business. They have a definite opinion, and they're right. You form that opinion before you even wait on them, and then to sell them something and make them think that they're right is interesting.

The difference between the younger group nowadays and the younger group of some years ago, we'll say fifteen, twenty years ago, is the most pronounced change in people. The younger group nowadays, they want to make

you think that they know it all, and that they can't be wrong. The older people are much easier to wait on.

I find that the young men as a group are easier to wait on than young women. Young women have seemed to have grown up a lot faster than young men have. The older people are a little more set in their ways, and you don't have any difficulty—not that you have any difficulty with the younger ones, but a great many of them want to make you think that they know everything about what they want to buy. And to try and talk them out of that sometimes becomes quite a little job. But I still enjoy waiting on them and we have very little difficulty with them. It's just the fact that most of them come with a definite idea in mind. With your older group, you don't have that to contend with near as much. Maybe it's because I'm in the older group myself, and that's the way that I rather look at it.

I have some younger people working in the store, and I find that the younger group would rather have them wait on them in the store than they would some of the older ones. I think the reason for that is they kind of think that maybe they can put their thoughts over on the younger ones more than they can on the older ones. And I guess they do.

But it's surprising the great number of people in the younger group that come in and they demand a lot of service. I find the younger group, they more or less like to wait on themselves, more so than the older people who are very happy to have somebody wait on them to show them something. The younger people like to pick it up. They're a little more destructive than your older people. I think they're used to super markets. They're used to going in and picking up things and waiting on themselves. It becomes quite a problem though, in a store like this. There's so many

things that you can't let them handle, that would be damaged by handling. We don't have that trouble with the older people, but we do with the younger group. Now I shouldn't say *trouble*, because certainly it's not any trouble to wait on anybody. That's what we're in the store for, and that's what we have the store for, but on the other hand, you have to handle them entirely different than you do older people.

At Christmas time, it becomes necessary to have floorwalkers, which we never even thought of ten years ago. We have to have them, not so much from the point of pilferage as from the point of destructiveness, not intentional either. They just like to handle things and look at them, and open packages that shouldn't be opened. You have a great many things that are in sealed packages, and after you break the seal, they're not salable. So we have floorwalkers for that reason.

I don't say we speak of it as trouble. Actually, it isn't trouble, because I think when anybody trades with us and comes in the store, they're doing us a favor, we're not doing them a favor to wait on them and sell them merchandise. They're doing us a favor by coming in and buying merchandise from us. I've always tried to look at it that way. And in having our sales meeting, we've always stressed that fact that the people are doing us a favor, and we're not doing them a favor to wait on them. That's because they can go in many other stores, and buy the same things. We like to look at it in the way, that it's a favor on their part to trade with us. I think in the years that we've been here it's paid off. We've tried to give that impression. We've got very many favorable comments that people like to trade with us.

We do deliberately foster an atmosphere that's old-fashioned, in the best connotation.

Your elderly people, older groups, in fact, they notice those things. I don't think your younger ones do. I don't think they pay any attention to it. But your older people, I think, do. We've got people on our books that have regular charge accounts that have had for fifty years. Started when they were young, and they've stayed right along the whole time.

Of course, I think that you have to keep your store a little up-to-date, too. That can't all be on the side of the customer, the store has to do some things. And we've always felt that we did, we've tried to keep it up-to-date. Of course, conditions change and times are changing, and I realize that the younger group demand different things and want different things and want different kind of service and all that. But we try to give them what they want and to wait on them the way they want. But at the same time, we try to do that for the different groups, the different age groups. You can pick them out pretty well when you're waiting on them. You can pretty well pick out what this customer will want, what kind of service, and what kind of service the other one will want. I think over a period of years you build up an idea, build up a knowledge of customers.

I don't think our customers are any different than customers any place else. I think the same group of customers will be the same in any store, but you do have different kinds of customers. The same kind of customers that will trade in here will trade in other stores, too. As a whole, your different groups are the same anywhere you go.

For sure, self-service has made a lot of difference. Twenty years ago, there was no such thing as self-service, and people didn't want to go to the shelves and pick up things. They wanted to be waited on. And that's true of the older people today, but not the younger ones. And so your times and conditions have to change with the times, I guess.

There's many things that I wish I had kept track of, many funny things that happened. I used to write them down. I have a little book, and I used to write down all the funny things that happened. I thought well, someday I'll get them all together, and that'd really make interesting reading. But in the last several years I haven't done that. In my desk, there's a notebook with so many different things that happened that are really funny incidents. The funny things that have happened over the many, many years.

I think in a drugstore, it's a little different than in other kinds of stores. You're dealing primarily with sick people to start with, or people that think they're sick. And the psychology that you have to use is a lot different than you would use in waiting on a person in a grocery store, or in a shoe store, or any other kind of a store. In the first place, you have to be sympathetic with them, primarily. You know, a lot of people—and over the years I've seen this so many times—think they're sick. If they just take a tablet of some kind, it wouldn't make any difference what the tablet was. And many, many times over the years I've been here, the doctors have prescribed just blank tablets that have cured people of sickness. The doctor realized that, and we see it all the time. But the thing about it is this, if you sympathize with them, if you're sympathetic to their trouble, no matter what it is, why they get better right away.

Just a little incident that happened the other day down here. A man came in, and he had asthma so bad that he could hardly breathe. He took ahold of the water fountain out there and braced himself against it, and he asked me if we had a certain thing and I said, "Yes, we do." He wanted it right away, and I came in the back and got his bottle. He opened the bottle and he took one tablet, and took a drink of water, and before he

could straighten up, he was all right. He was well. He straightened up and, “Ahhh, that’s better,” he says. The tablet can’t dissolve in their stomach in less than fifteen to thirty minutes; that’s the average time. And he took a drink of water and washed the tablet down and he was well. I was very sympathetic with him. I told him I knew when he got in that condition, he had to have it right away, and he went out just feeling fine. It’s just the idea. If I had told him, and said to him, “Why, that’d take fifteen or twenty minutes to dissolve, it couldn’t help you in that time,” he’d have been sick when he left here. He would have still been sick. It’s just the psychology that you have to be sympathetic with them, no matter what it is.

So many of them come in, and they have to tell you their troubles, and why they’re sick, and all this. You sympathize with them, and they’re better right away. Ninety percent of them are better.

Sometimes, when they have to wait for a prescription for a little while, you just want them to sit down, and you get them a drink of water, and they feel better, and they get better right away.

That’s not all of the thing, that’s sure, because a great many sick people are really sick. I wouldn’t make a statement of percentage, but there’s certainly a lot of people that their sickness is just a matter of mind. It’s surprising what the dose of medicine sometimes will do for them. That one that I just told you about, that only happened here about, it was in the middle of December, 1966. We got quite a kick out of it that the man could get over his asthma in ten seconds time by taking a tablet. That’s happened many, many times.

We have people calling up and wanting to know if the doctor phoned in the prescription and we’d say, “Yes.” “Well, when you gonna send it out?” And the directions will be

take one tablet or one capsule, or if it’s a liquid, one teaspoonful, *at bedtime*. And yet that medicine has to be in their hands immediately, or they’re still sick.

That’s happened right in the store. People are just—you think they’re going to drop dead right in their tracks, and when they get the medicine in their hands, they’re better right now. Well, they’re not going to take it for several hours until they go to bed, but they’re immediately better. Doctors, of course know that better than we do. I’ve been in the business a long time, and I see that all the time.

It’s just a matter of mind with a lot of people, just a state of mind, their being ill. I know, I’ve been sick, too, and a lot of people are sick, but a lot of them it’s just mind. I don’t mind them. I think when they go to a doctor, the doctor soon figures that out.

Conditions are changed in the prescription department more than they have in the other departments in the store. A great many doctors don’t want the patient to know what they’re getting, and a lot of them do. Now I think where a person is really sick, it doesn’t make any difference whether he doesn’t know. But if a patient thinks he’s sick, and the doctor prescribes something, it’s much better that they don’t know what they’re getting, because a great many times the doctor doesn’t really give them too much medication; it’s just a question they have to take something.

I recall a doctor that used to be here—he’s passed away since—that used to send specimens to the laboratory, and he wouldn’t get them back for two or three days. He always prescribed for his patients a liquid with a little peppermint flavor and a little bicarbonate of soda in it. And he would tell them to take that for two or three days, a teaspoonful three times a day, and then come back. If he didn’t give them any medicine, they would

never have gone back. But he had to give them something to make them think that he knew what he was treating them for, and the idea was that he couldn't tell until he got the laboratory return. But the patient had to take some medication, or the doctor wasn't any good. This particular doctor did that all the time. I filled hundreds of prescriptions for that same thing, just so the patient would be relieved. Of course, that's more on the medical side, I guess it is, than on the pharmaceutical side, but on the other hand, we see those things, we see them happen. They become very interesting after a number of years, too. And that's the reason why I enjoy the drug business.

I enjoy waiting on people. I like to see their reactions to different things. I don't think I'd ever be satisfied if I didn't meet the public. I just don't think I would. I enjoy it so much. When I'm away from it, why, I can hardly wait to get back.

I don't really plan to retire. Semi-retire, possibly. I'm not working too much now, although I like to stay in the front of the store. I don't work as hard as I used to, and I don't do as much work by any means as I used to. But I still enjoy meeting people and studying people. I think that's the way you ought to put it. It's been more or less a hobby of mine. Sometimes just trying to figure out what they want before they ask you. Lots of times you hit it right on the head. I don't know why it is, but people come in and you kind of form an opinion what they're going to buy, what they're going to ask for. I don't know if it's the way they look or what, but you do. You get opinions.

We have a little standing joke around the store. Somebody will come in the store, and somebody will say what they're going to ask for. They'll ask for such-and-such a thing, and it will turn out to be that. Their actions

and their reactions. That's particularly on the drug side, not so much in the toilet goods department. In the drug side, we have a little more or less joke about it. We do hit it quite often. We pick them out. That is true of the younger people more than of the older people.



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## CONCLUSION

I might say this. I got started in the drug business, and a couple of times I got out of it. I was working in drugstores, and it's always been fascinating to me, and I've always gone back to it. I went into mining once, then I was in something else another time, but I wouldn't change it for anything. In looking back over the years, and the things I might have done, I think the drug business has been very rewarding as far as I'm concerned. That is, not the drug business as a business, but the drug business as a means of employment, I would say that. And it's been very rewarding to me personally to have been able to wait on and service the many people, some very fine people.

I know the thing I was thinking about the other day was about the number of governors that I have had as personal customers in the store. Although they lived mostly in Carson, practically every governor for the last fifty years has had an account in the store. I was proud of that. Being in another town, they still had an account with us. Every one of the governors. Naturally, they

did most of their trading in Carson, but they maintained an account here. Well, probably it was because we had what they wanted, and we would always try to sell them the fact that we did have adequate stock and things. So we had them for customers.

If I had another chance to do something else, I don't think I would have changed it. I like it and I guess I'll stay with it the rest of my life, as far as I know. I am very much satisfied with the drug business as a means of expression, and not just as a means of making a living. Of course, I guess that's primarily the thing we do in anything—as a means of meeting people and being of service to people. I'm very well satisfied over the last fifty years.





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